COLLEGE OF MARIN

ADMISSIONS & RECORDS
Change of Grading Option Request

PLEASE PRINT IN INK ONLY

This form must be submitted to the Offices of Admissions and Records at the Kentfield or Indian Valley Campus upon registration, or no later than 30% of the length of the course for the school term and/or short term course. Please see the Important Dates calendar in the schedule of classes. ***This form is to be used only for those courses listed in the current catalog with the grading option of pass/no pass or letter grade.***

SEMESTER
❑ FALL 20 ____ ❑ SPRING 20 ____ ❑ SUMMER 20 ____

MARIN ID # M | | | | | | | | | |

NAME _____
LAST FIRST MIDDLE INITIAL

MAILING ADDRESS _____
NUMBER & STREET

_____
CITY STATE ZIP

DAY PHONE _____ E-MAIL ADDRESS _____

I am requesting that my grading option be changed to (please mark an "X" under your grading option):

CRN	Subject	Course	Pass/No Pass	Letter Grade

STUDENT'S SIGNATURE _____ DATE _____

RECEIVED BY _____ DATE _____ PROCESSED BY _____ DATE _____

85_Grading_Option_Request_09_10

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